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PATENT

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On September 9, 2004

SEP 09 2004

By:

Jill R. Clarke

Timothy L. Smith

Attorney Docket No.: P0013US10

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Inventor

Application No.: 09/929,985

Confirmation No.: 3858

Filed: August 14, 2001

For: AUTOMATED PRECISION
OBJECT HOLDER AND
METHOD OF USING SAME

Art Unit: 1743

Examiner: A. SODERQUIST

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is submitted in response to the Office Action dated March 9, 2004. A petition for a three month extension of time, from June 9, 2004 to and including September 9, 2004, is enclosed.

Please amend the application as follows:

Amendments to the Claims 2
Remarks 9
Conclusion 16

BEST AVAILABLE COPY

SEP 09 2004

PTO/SB/21 (04-04)

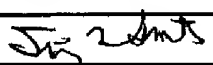
Approved for use through 07/31/2008. OMB 0651-0031

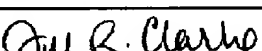
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/929,965
	Filing Date	08/14/2001
	First Named Inventor	James K. Mainquist
	Art Unit	3858
	Examiner Name	SODERQUIST, ARLEN
Total Number of Pages in This Submission	Attorney Docket Number	P1013US10

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Director is authorized to charge any additional fees to Deposit Account No. 60-1885. Applicants request a three (3) month extension of time.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Timothy L. Smith, Ph.D.
Signature	
Date	September 9, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at facsimile number (703) 872-9306 on the date shown below.			
Typed or printed name	Jill R. Clarke	Date	September 8, 2004
Signature			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form, and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)

Approved for use through 07/31/2008. OMB 0551-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 1110**Complete if Known**

Application Number	09/929,965
Filing Date	09/14/2001
First Named Inventor	James K. Mainquist
Examiner Name	SODERQUIST, ARLEN
Art Unit	3858
Attorney Docket No.	P1013US10

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None
Order☒ Deposit Account:

Deposit Account Number: 50-1885

Deposit Account Name: Genomics Institute of the Novartis Research Foundation

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1001	770		2001	385	Utility filing fee	
	1002	340		2002	170	Design filing fee	
	1003	530		2003	265	Plant filing fee	
	1004	770		2004	385	Reissue filing fee	
	1005	160		2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 770)**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
		X	
Independent Claims	0	X	0
Multiple Dependent		X	0

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description
	1202	18		2202	9	Claims in excess of 20
	1201	88		2201	43	Independent claims in excess of 3
	1203	290		2203	145	Multiple dependent claim, if not paid
	1204	88		2204	43	** Reissue independent claims over original patent
	1205	18		2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

*for number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

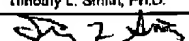
Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130		2051	65	Surcharge - late filing fee or oath	
	1052	50		2052	25	Surcharge - late provisional filing fee or cover sheet	
	1053	130		1053	130	Non-English specification	
	1812	2,520		1812	2,520	For filing a request for reexamination	
	1804	820*		1804	820*	Requesting publication of SIR prior to Examiner action	
	1805	1,840*		1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110		2251	55	Extension for reply within first month	
	1252	420		2252	210	Extension for reply within second month	
	1253	950		2253	475	Extension for reply within third month	950
	1254	1,480		2254	740	Extension for reply within fourth month	
	1255	2,010		2255	1,005	Extension for reply within fifth month	
	1401	330		2401	165	Notice of Appeal	
	1402	330		2402	165	Filing a brief in support of an appeal	
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	1453	1,330		2453	665	Petition to revive - unintentional	
	1501	1,330		2501	665	Utility issue fee (or reissue)	
	1502	480		2502	240	Design issue fee	
	1503	640		2503	320	Plant issue fee	
	1480	130		1480	130	Petitions to the Commissioner	
	1807	50		1807	50	Processing fee under 37 CFR 1.17 (q)	
	1806	180		1806	180	Submission of Information Disclosure Stmt	
	8021	40		8021	40	Recording each patent assignment per property (times number of properties)	
	1809	770		2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
	1810	770		2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
	1801	770		2801	385	Request for Continued Examination (RCE)	
	1802	900		1802	900	Request for expedited examination of a design application	

Other fee (specify) Additional claim fee: 2 additional independent claims

180

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** (\$ 1110)**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Timothy L. Smith, Ph.D.	Registration No. (Attorney/Agent)	35,367	Telephone	858-812-1547
Signature				Date	September 8, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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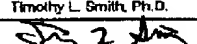
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PTO/SB/17 (10-03)
Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2004</h2> <p style="text-align: center;"><i>Effective 10/01/2003. Patent fees are subject to annual revision.</i></p>		Complete if Known	
		Application Number	09/929,985
		Filing Date	08/14/2001
		First Named Inventor	James K. Mainquist
		Examiner Name	SODERQUIST, ARLEN
		Art Unit	3858
		Attorney Docket No.	P1013US10
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$)		1110	

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 50-1885 Deposit Account Name: Genomics Institute of the Novartis Research Foundation The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		FEE CALCULATION (continued) 3. ADDITIONAL FEES																																																																																																																																																																																																																																											
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1501	1501	1,330	665	Utility issue fee (or reissue)																																																																																																																																																																																																																																									
1502	1502	480	240	Design issue fee																																																																																																																																																																																																																																									
1503	1503	640	320	Plant issue fee																																																																																																																																																																																																																																									
1480	1480	130	130	Petitions to the Commissioner																																																																																																																																																																																																																																									
1807	1807	50	50	Processing fee under 37 CFR 1.17 (q)																																																																																																																																																																																																																																									
1806	1806	180	180	Submission of Information Disclosure Stmt																																																																																																																																																																																																																																									
8021	8021	40	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																																																																																																									
1808	1808	770	385	Filing a submission after final rejection (37 CFR § 1.129(a))																																																																																																																																																																																																																																									
1810	1810	770	385	For each additional invention to be examined (37 CFR § 1.129(b))																																																																																																																																																																																																																																									
1801	1801	770	385	Request for Continued Examination (RCE)																																																																																																																																																																																																																																									
1802	1802	900	900	Request for expedited examination of a design application																																																																																																																																																																																																																																									
Other fee (specify): Additional claim fee: 2 additional independent claims					160																																																																																																																																																																																																																																								
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>		Total Claims	Extra Claims	Fee from below	Fee Paid	1	0	0	0	Independent Claims	0	0	0	Multiple Dependent	0	0	0	<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>2202</td> <td>18</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>2201</td> <td>88</td> <td>43</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>2203</td> <td>290</td> <td>145</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>2204</td> <td>88</td> <td>43</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>2205</td> <td>18</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5">SUBTOTAL (2)</td> <td>(\$ 0)</td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1202	2202	18	9	Claims in excess of 20		1201	2201	88	43	Independent claims in excess of 3		1203	2203	290	145	Multiple dependent claim, if not paid		1204	2204	88	43	** Reissue independent claims over original patent		1205	2205	18	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$ 0)																																																																																																																																																																																
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SUBMITTED BY		Complete if applicable			
Name (Print/Type)	Timothy L. Smith, Ph.D.	Registration No. (Attorney/Agent)	35,367	Telephone	858-812-1547
Signature		Date	September 9, 2004		

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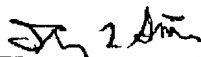
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